	**	Departr	nent of F	ublic	с Не	alth a	ind	Social So al Health	ervices		-	-			
										Dana	1	-e- \	3		
INSPECTION RSN TYP	EICRADE	Food E	Stabils	snm	len	t ins	р	ENT NAME	Report	Page	4	<u> </u>	<u>—</u>		
Regular	T		1 20		E31/	ABLISI	NE	RICAN	BAKERY						
Follow-up	1 12	The state of the s			PER	PERMIT HOLDER									
Complaint 1/	RATING	9:45 AM	4:40	7:40 PM			CHUA, JOSEPH								
Investigation	ERMIT NO		LOC	ATION	(Ac	idress)	U a a a a a a l								
Other: B SANITARY PERMIT					2301 ARMY DR., HARMON										
			TELEPHO			No. of Risk Factor/Intervention Violations RISK CA							ORY		
			588150		No. of Repeat Risk Factor/Intervention Violations						2				
FO									IEALTH INTERVE		3	-			
IN = In compliance O				-					appropriate box for COS and/o during inspection R = Repeat \		3 = Dem	anit as	alada		
Compliance Status	OT - NOT III COMpile	ince 140 - 140t coserv						lance Status		TOTALION FI		R			
	Annual Control of the	ervision						Po	tentially Hazardous Food				V 188		
1 N OUT	Person in charge present, demonstrates knowledge, and performs duties			1 1	6				Proper cooking time and temp				6		
Employee Health									Proper reheating procedures for hot holding Proper cooling time and temperatures		+		6		
2 IN OUT Management awareness, policy present				1	6	19			Proper hot holding temperature		\rightarrow		6		
3 (IN) OUT	Proper use of reporting, restriction & exclusion Good Hygienic Practices				6		-	OUT N/A	Proper cold holding temperatu				6		
K	or I	7		21	IN	OUT N/A N/C	Proper date marking and disp	osition			6				
4 (IN) OUT N/A N/O	T N/A N/O Proper eating, tasting, drinking, betelnut, or tobacco use				6				Consumer Adviso	ry					
5 (IN) OUT N/A N/O		m eyes, nose, and mout			6		Т		Consumer Advisory provided	for row or					
		amination by Hand	S		0	22	IN	OUT (N/A)	undercooked foods	OI IAN OI			6		
 K	No hare hand cor	ntact with ready-to-eat for	oods or	+	6		-		Highly Susceptible Popu	dations			-		
7 (N) OUT N/A N/O	approved alternate method properly followed				6	23	23 IN OUT (A) Pasteurized foods used; prohibi						6		
8 (M) (867)	Adequate handwa	ashing facilities supplied	8.1		6	25	1	301 (8)	offered						
1			100010		_	~	Chemical		1						
9 (N) OUT	Food obtained fro	red Source om approved source	T	Т	6	24	IN	OUT (NA)	Food additives: approved and	property used			6		
	Food received at				6	25	N.	оит	Toxic substances properly ide	ntified, stored,			6		
11 (IN) OUT					6				used	December of the second			L,		
12 IN OUT N/A N/O Required records available: shellstock tags,				1 1	6	10000	Conformance with Approved Procedures Compliance with variance, specialized								
Protection from Contamination						26	IN	OUT (N/A)	process, and HACCP plan	,01011000			6		
13 IN OUT N/A Food separated and protected					6		F	Risk factors a	re improper practices or procedu	ures identified	as the m	nost			
14 IN OUT N/A Food contact surfaces: cleaned & sanitized Proper disposition of returned, previously				$\overline{}$	6	prevalent contributing factors of roodborne limess or injury,									
15 (N) OUT			6												
			GOOD												
Mark "X" in box: If									micals, and physical objects into inspection R =Repeat violation		emerit n	oints			
Mark "X" in box: If numbered item is not in compliance and/or if COS Compliance Status				COS R PTS			Compliance Status COS R								
Safe Food and Water						40	_		Proper Use of Utens	ills		35			
27 Pasteurized eggs used where required				-	1	40	1		sils: properly stored pulpment and linens; properly st	ored dried			1		
Water and Ice from approved source					2	41		handled	property at	orea, arroa,			1		
29 Variance obtained for specialized processing methods					1	42	1		single-service articles: properly	stored, used			1		
Froper cooling methods used; adequate equipment for					-	43	1	Gloves use	Utensils, Equipment and	Vendina		00150	1		
temperature control					1	44	T	Food and n	onfood-contact surfaces cleans		TT		4		
31 Plant food properly cooked for hot holding					1	\vdash	_	designed, d	constructed, and used				1		
32 Approved thawing methods used					1	45		strips	ng facilities: installed, maintaine	u, used; lest			1		
33 Thermometer provided and accurate					1	46			ontact surfaces clean				1		
Food Identification 34 Food properly labeled; original container						Physical Facilities 47 Hot & cold water available, adequate pressure 2									
34 Food properly labeled; original container Prevention of Food Contamination						47	+		water avallable, adequate press istalled; proper backflow device		+	\dashv	2		
35 Insects, rodents, and animals not present				П	2	49	-		d wastewater properly disposed		\vdash	\dashv	2		
36 Contamination prevented during food peparation, storage &			ge å		1	50	X	/	ies: properly constructed, suppli		\Box		2		
37 Personal cleanliness				+-+	1	51	1	1	fuse properly disposed; facilities		+	\rightarrow	2		
38 Wiping cloths: properly used and stored					1	52			cilities installed, maintained, and				1		
Washing fruits and vegetables I have read and understand the above violation(s)					1	53			entitation and lighting; designate	ed areas use			1		
			4 0.	-	1	54	T	IS-14	Documents and Place		1 1		200		
Person in Charge (Print and Sign) KUFIND C. STA, EUENP									rmit, Health Certificates valid a	ra posted			2		
The state of the state	TUP	1ND C. SSI	s, ele	40	S	2.0	7/2	1/1 P		(3)		10 m			
DEH Inspector (Print an	d Sign) LEILI	THI NAVARRO	, EPHO	I,	X	100	7/2	21/17 FO	ollow-up (Circle one): (YES	NO F	ollow-u	2 Pate	4		
Rev: 08.27.15			White: DPHS	- 6	Yolk	w: Foo	d Est	ablishment			Dell'	-	_		

Department of Public Health and Social Services Division of Environmental Health Food Establishment Inspection Report Page 2 of 3 LOCATION (Address) ESTABLISHMENT NAME AMERICAN BAKERY 2301 ARMY DR., HARMON INSPECTION DATE PERMIT HOLDER SANITARY PERMIT NO. 170002160 CHUA, JOSEPH 09 121 117 **TEMPERATURE OBSERVATIONS** Temperature (° F) Item/Location Temperature (° F) WARMER 197.5 TUNA EMPANADA PORK SIDMAI / STEAMER * 128.5 PORK SIOPAD STEAMER 131.0 CORRECT ITEM NO. **OBSERVATIONS AND CORRECTIVE ACTIONS** BY DATE Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code. A REGULAR INSPECTION WAS CONDUCTED TODAY IN RESPONSE TO COMPLAINT NO. 17-0878 REGARDING COCKRUTACHES IN THE FACILITY. THE COMPLAINT WAS NOT DOSERVED DURING THIS INSPECTION PROVIOUS INSPECTION NATED 07/29/15 RESULTED IN A GRADE/RATING OF Ø/A. THE FOLLOWING VIOLATIONS WERE OBSERVED TODAY. NO EMPLOYEE HEALTH POLICY DOCUMENTS PRESENTED. A DOCUMENTATION OF EMPLOYEE HEALTH POLICY SHALL BE MADE AVAILABLE 10/02/17 TO ENSURE THAT EMPLOYEES ARE TRAINED ON PROPER EXCUSION AND RESTRICTION POTENTIALLY HAZARDOUS POTON (PHF)/TIME AND TEMPERATURE CONTROL FOR SAPETY M 19 (TOS) POODS SUCH AS PORK SIGMAL AND SIDPAD DID NOT MEET TEMPERATURE NEOUILE-MENT FOR HOT HOLDING. COKRECTIVE ACTION: SAID FOOD WERE DISCORDED PHE/TOS FOOD SHAW BE KENT AT INTERNAL TEMPERATURE OF 140°F OR MANE FOR HOT HOLDING DO LIMIT PATHOGEN GRINNIT AND/OR TOXIN FORMATION. BOTTLED DRINKS STOKED DIRECTLY ON THE FLOTIR IN THE JORNEE ROOM. 36 FITTO AND DRINKS SHALL BE STITLED ATLEAST SIX INCHES OFF THE GRAVIND TO PREVENT CONTAMINATION AND TO FACILITATE PROPER CLEANING. IN-USE TONGS FOR THE SIMMAL, SLORAD, AND EMPANADA STORED ON TOP OF PAPER WRAPPERS / CASH EX Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections. Person in Charge (Print and Sign) DEH Inspector (Print and Sign) LEILANI NAVARAO, EPOD I Rev: 08.27.15

Department of Public Health and Social Services **Division of Environmental Health** Food Establishment Inspection Report Page 3 of 3 ESTABLISHMENT NAME LOCATION (Address) 2301 ARMY DR., HARMON AMERICAN BAKERY INSPECTION DATE PERMIT HOLDER CITUA, JOSEPH SANITARY PERMIT NO. 09,21,17 170002160 ITEM NO. **OBSERVATIONS AND CORRECTIVE ACTIONS** BY DATE Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code. MEN'S RETTROOM HAS A FOUL GOOR (I.E., SMEUS OF URINE), AND VENT GALLES FOR BOTH RESTROOMS HAVE DUST BUILD-ING. TOLLET FACILITIES SHAW BE KEPT CLEAN TO PREVENT SPREAD OF GERMS. A BUNCH OF GARBAGE, TRASH, UNUSED EDUIPMENT AND WOOD FOUND ON THE GROUND 10/21/A 51 LEADING TO THE DUMPSTER; GARBAGE CONTAINER INADEBUATE FOR THE AMOUNT OF GARBAGE/TRASH COLLECTED. GARBAGE PETUSE SHALL BE PROPERTY STORED IN RECEPTACES WITH COIER, AND SHAW BE DISPOSED OF IN A TIMETY MANNER. TO PREVENT HARBORAGE OF PETT PLANKET OF THE VIOLATIONS WERE THEN. REMOVED "A" PLACTED NO. 02/47. POSTEN "B" PLACARD NO. 00587. DISCUSSED THIS REPORT WITH MINITOER, RYPIND STA. FLENDE JR. Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections. Person in Charge (Print and Sign) DEH Inspector (Print and Sign)

Rev: 08.27.15

White: DPHSS/DEH

Yellow: Food Establishment